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-	PAT	ENT APPLICATION			
		N AND POWER OF AT			
ATTORNEY DOCKET NO. MCS-063-03			MS DOC	MS DOCKET NO. 304217.01	
As a below named inver	ntor, I hereby declare that:				
My residence/post office	e address and citizenship are	as stated below next to	my name;		
I believe I am the origin	al, first and sole inventor (if o	only one name is listed	below) or an original, fi	rst and joint inventor (if	
plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: <u>SELF-DESCRIPTIVE MICROPHONE ARRAY</u> , the specification of which is filed herewith unless the following box					
entitled: SELF-DESCRI	PTIVE MICROPHONE ARRA	Y, the specification of	which is filed herewith t	unless the following box	
is checked:					
() was filed on as US Application Serial No. or PCT International Application					
() was filed on as US Application Serial No. or PCT International Application Number and was amended on (if applicable).					
I hereby state that I have reviewed and understood the contents of the above-identified specification, including the claims, as					
amended by any amendment(s) referred to above. I acknowledge the duty to disclose all information which is material to					
patentability as defined in 37 CFR 1.56.					
	•				
Foreign Application(s) and/or					
I hereby claim foreign priority	benefits under Title 35, United State	s Code Section 119 of any fo	reign application(s) for patent	or inventor(s) certificate listed	
which priority is claimed:	ed below any foreign application fo	r patent or inventor(s) certi-	ncare naving a ning date ber	ore that or the application on	
COUNTRY	APPLICATION NUMBER	DATE FILED	PRIORITY CLAIMED	UNDER 35 U.S.C. 119	
		····	YES:	NO:	
			YES:	NO:	
	<u></u>				
POWER OF ATTORNEY:					
As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) associated with					
		Customer No. 27662			
to prosecute this application a	nd transact all business in the Patent	and Trademark Office conn	ected therewith.		
Send Correspondence to:	· · · · · · · · · · · · · · · · · · ·		Direct Telephone Calls	Го:	
_			Control N		
Contact Name Firm Name			Contact Name Contact Phone Number		
Firm Address			Couract t name 14mmber		
City, State and Zip					

DECLARATION AND POWER OF ATTORNEY

ATTORNEY DOCKET NO. MCS-063-03

MS DOCKET NO. 304217.01

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Citizenship: Bulgaria Full Name of Inventor: Ivan Tashev Residence: 13407 NE 135th Street, Kirkland, WA 98034 Post Office Address: 13407 NE 135th Street, Kirkland, WA 98034 Wallowe Inventor's Signature Full Name of Inventor: Ross Cutler Citizenship: United States Residence: 16031 277th PL NE, Duvall, WA 98019 Post Office Address: 16031 277th PL NE, Duvall, WA 98019 2/3/04 Inventor's Signature Full Name of Inventor: Henrique S. Malvar Citizenship: Brazil Residence: 2302 233rd Avenue NE, Sammamish, WA 98074 Post Office Address: 2302 233rd Avenue NE, Sammamish, WA 98074 Feb. 2, 2004 Inventor's Signature Full Name of Inventor: Daniel J. Sisolak Citizenship: United States Residence: 1753 28th AVE NE, Issaguah, WA 98029 Post Office Address: 1753 28th AVE Nt. Issaguah, WA 98029 -eb 9. 2004 Full Name of Inventor: John E. Unverferth III Citizenship: United States Residence: 3313 168th PL. SE, Bellevue, WA. 98008 Post Office Address: 3313 168th PL. SE, Bellevue, WA. 98008

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